

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

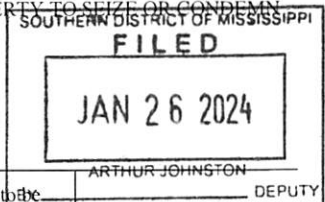
PLAINTIFF
UNITED STATES OF AMERICA

COURT CASE NUMBER
3:20-cv-00729-CWR-LGI

DEFENDANT
JAMES ROE

TYPE OF PROCESS
Motion/Order for Debtor's Exam

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
JAMES ROE
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
1033 Northpointe Drive, Jackson, MS 39211 or wherever found



SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Clay B. Baldwin, AUSA
United States Attorney's Office
501 East Court Street, Suite 4.430
Jackson, MS 39201

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

DEPUTY

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

PLEASE SERVE BY **February 1, 2024.**

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

601-965-4480

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 043	District to Serve No. 043	Signature of Authorized USMS Deputy or Clerk <i>P. Erickson</i>	Date 1/18/24
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date **1/22/2024** Time **1:45** ☐ am ☒ pm

Signature of U.S. Marshal or Deputy

Service Fee 65⁰⁰	Total Mileage Charges including endeavors \$22 78	Forwarding Fee —	Total Charges \$87 78	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$ 87 78
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REMARKS:

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TO:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS
MAY BE USED

Form USM-285
Rev. 11/13